

HAWAII STATE ETHICS COMMISSION
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STATE SE SEAMAG LTATE ELMICOTO (MM.58), N

## **LOBBYIST REGISTRATION FORM**

(Type or Print Clearly)						
PART I LOBBYIST	(First) (Middl	e) TELEPHONE				
NAME(Last)						
TAKAMURA	CARL	532 - 2244				
MAILING ADDRESS (Street)		FAX				
	HAWAII BUSINESS ROUNDTABLE 1001 Bishop Street	545-202S				
(City)	Pauahi Towes <sub>t</sub> Syjte 2630 Honolulu, Hawaii 96813	(Zip Code)				
EMPLOYING ORGANIZATION	(Fill in only if you are employed by a business entity which has been	retained to lobby) TELEPHONE				
	(SAME AS ABOVE)					
MAILING ADDRESS (Street)		FAX				
(City)	(State)	(Zip Code)				
PART II ORGANIZATION						
( 54	ME AS ABOVE)					
MAILING ADDRESS (Street)		FAX				
(City)	(State)	(Zip Code)				
NAME OF PERSON RESPONSI	BLE FOR PREPARING ORGANIZATION'S EXPENDITURES ST	TELEPHONE TELEPHONE				
MAILING ADDRESS (Street)		FAX				
(City)	(State)	(Zip Code)				
(,)	, ,					

PAR'	TIII DESCRIPTION O	OF SUBJECTS UPON WHICH	I YOL	JEXPECT TO LOBBY		
[] [] []	Agriculture  Communications & Public Utilities  Consumer Protection & Commerce  Culture, Arts, Historic Preservation  Ecology, Energy Environmental Protection	Education  Government Operations & Finance  Hawaiian Affairs  Health  Housing	[] [] [] []	Human Services Intergovernmental Relations, International Affairs Labor & Employment  Planning, Land & Water Use Management  Public Safety & Corrections	Science, Technology & Economic Development  Tourism & Recreation  Transportation  Other: (indicate below)	
		<u> </u>				
PAR	TIV CERTIFICATION	N OF LOBBYIST				
I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.						
CQ Jedanu 11/27/02						
(Signature of Lobbyist)				(Date)		
(Oignature of Lobbyist) (Date)						
PART V AUTHORIZATION TO LOBBY						
NAME TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED						
	CARL TAG	KAMU RA				
NAME	OF OPCANIZATION (if and	licable)	<del></del>	ITE	ELEPHONE	
NAME OF ORGANIZATION (if applicable)						
HAWAII BUSINESS ROUNDTABLE				532-2244		
MAILING ADDRESS (Street)  Pauahi Tower, Suite 2630  FAX				X		
Honolulu, Hawaii 96813						
		Honoldiu, Hawaii 500	13		545-2025	
(City) (State) (Zip Co		9)				
I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.						
× Karine 11/27/02					11/27/02	
(Signature of Authorizing Officer or Person Represented) (Date)						

ROVER DRUÉ

CHAIR - HAWALL BUSINESS POUNDTABLE